

RECEIVED

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

DEC 22 2004

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

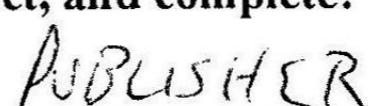
S.D. REC STATE

1. TITLE OF NEWSPAPER	2. DATE	
Hudsonite		9-27-04
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE
WEEKLY	52	\$ 17/21
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)		
PO Box 467, Hudson, SD 57034		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)		
10 E. 1ST ST., PO Box 227, ALCESTER, SD 57001-0227		
6. FULL NAME OF PUBLISHER: PAUL B. BUUM		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME		COMPLETE MAILING ADDRESS
PAUL & MICHELE BUUM, PO Box 301, ALCESTER, SD 57001		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form)		
STATE BANK OF ALCESTER, PO Box 168, ALCESTER, SD 57001 MARY ETTE BROSE, 706 IRENE DRIVE, KERVIL, TX 78028		
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS
A. TOTAL NO. COPIES (Net Press Run)		400
B. PAID AND/OR REQUESTED CIRCULATION		ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
1. Sales through dealers and carriers, street vendors and counter sales.		34
2. Mail Subscription (Paid and or requested)		183
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		217
D. FREE DISTRIBUTION		14
1. BY MAIL, CARRIER OR OTHER MEANS		14
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		4
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		235
F. COPIES NOT DISTRIBUTED		161
1. Office use, left over, unaccounted, spoiled after printing		162
2. Return from News Agents		4
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)		400

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
 I swear that the statements made by me are true, correct, and complete:



(Signature)

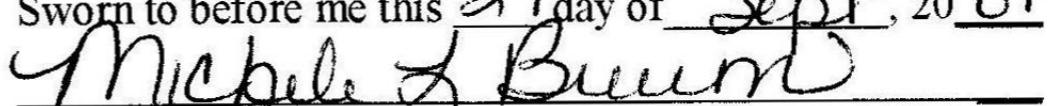


(Title)

State of South Dakota)

County of Lincoln) \$

(Seal)

Sworn to before me this 27th day of Sept, 2004


Notary Public

My Commission Expires 5/8/2005

My commission expires: _____